

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/070948

FILING DATE

APPLICANT(S)

CLAIMS

ITEM	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		ITEM	IND.		DEP.		IND.		DEP.		IND.		DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.										
	1						51												
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48							98												
49							99												
50							100												
TOTAL IND.	2						TOTAL IND.												
TOTAL DEP.	13						TOTAL DEP.												
TOTAL CLAIMS	15						TOTAL CLAIMS												